

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

YHN

PLAINTIFF

COURT CASE NUMBER

James Worthen

08C2444

DEFENDANT

TYPE OF PROCESS

Michael Nolan, et al.

S/C

SERVE

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
Mr. Michael Nolan, Uniformed Chicago Police Officer 25th District

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

AT

C.P.D. C/O P. Martin, Supv. of Subpoenas 3510 S. Michigan Ave. Chicago, IL 60635

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

James Worthen, #2007-0071905  
Cook County Jail  
P.O. Box 089002  
Chicago, IL 60608**FILED**J.N 5-22-2008  
MAY 22 2008MICHAEL W. DOBBINS  
CLERK, U.S. DISTRICT COURT

Number of process to be served with this Form - 285

1

Number of parties to be served in this case

3

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold OFFICER NOLAN WORKS OUT OF 5555 W. Grand ST, Fold

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

05-14-08

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE**I acknowledge receipt for the total number of process indicated.  
(Sign only first USM 285 if more than one USM 285 is submitted)Total Process  
1 of 3District of Origin  
No. 24District to Serve  
No. 24

Signature of Authorized USMS Deputy or Clerk

TO

Date

05-14-08

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Emerald Yancy Admin

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service

Time

am

5/15/08

3:30

(pm)

Signature of U.S. Marshal or Deputy

J. Thiel

Service Fee

Total Mileage Charges  
(including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal or

Amount of Refund

48.00

5.34

0

53.34

0

53.34

0

REMARKS:

1 DUSM 11 miles RT  
1 Hour